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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Rose First name Marie Middle name Lopez	-	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have			
	used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1478		

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Debtor 1 Rose Marie Lopez

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
		EINs	EINs			
5.	Where you live	2050 Western Avenue	If Debtor 2 lives at a different address:			
		Apt. #104 Waukegan, IL 60085 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Lake				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
5.	Why you are choosing	Check one:	Check one:			
this district to file for bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Rose Marie Lopez

7.	The chapter of the						
	Bankruptcy Code you are choosing to file under						
	•	■ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subi	pically, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or ch	r money
					tallments. If you choose this optic ts (Official Form 103A).	n, sign and attach the Application for Individuals	to Pay
			I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty li applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must f				
			the Application	on to Have the (Chapter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.	
).	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes	S.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	5.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.			
	Tooluonioo !	☐ Yes	s. Has yo	ur landlord obta	ained an eviction judgment agains	you?	
				No. Go to line	12.		
				Yes. Fill out In this bankruptcy		ludgment Against You (Form 101A) and file it as	part of

Document Page 4 of 48 Case number (if known) Debtor 1 Rose Marie Lopez Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention? For example, do you own perishable goods, or livestock that must be fed,

> or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Rose Marie Lopez

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Rose Marie Lopez Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rose Marie Lopez Signature of Debtor 2 **Rose Marie Lopez** Signature of Debtor 1 Executed on February 21, 2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Rose Marie Lopez Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brittany Helfer	Date	February 21, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Brittany Helfer 6311064		
Albarran Law Offices Firm name		
204 N. West Street Waukegan, IL 60085		
Number, Street, City, State & ZIP Code		
Contact phone 874-782-1111	Email address	albarranlaw@yahoo.com
6311064 IL		
Bar number & State		

		DOCUM	eni Pade 8 01 48						
Fill in this information to identify your case:									
Debtor 1	Rose Marie Lope:	Z							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS						
Case number (if known)									

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,904.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,904.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	10,130.92
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	203,390.90
	Your total liabilities	\$	213,521.82
ar	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,756.1
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,752.9
ar	t 4: Answer These Questions for Administrative and Statistical Records		
5.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	chedules.
·.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	persona	l, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

4,100.08

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 18-04776 Doc 1 Filed 02/21/18 Entered 02/21/18 18:17:40 Desc Main Document Page 10 of 48 Fill in this information to identify your case and this filing: Debtor 1 **Rose Marie Lopez** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mazda Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Mazda3 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Debtor 2 only Current value of the Current value of the 54000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$7,834.00 \$7,834.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,834.00 pages you have attached for Part 2. Write that number here......>>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 18-0477 Rose Marie Lopez		Filed 02/21/18 Document	Entered 02/21/18 18:: Page 11 of 48 Case number		n
■ Yes.	Describe					
		ts: a couch, c kware, bed, d		able and chairs, microwave,		\$1,500.00
□ No				pment; computers, printers, scanner	s; music collections; elect	ronic devices
	HP L	_aptop 2 year	rs old]	\$100.00
	Sam	sung 55' Sma	art HD TV]	\$500.00
Example No	ibles of value les: Antiques and figuring other collections, me			ooks, pictures, or other art objects; st	amp, coin, or baseball car	d collections;
Example ■ No	nent for sports and hob les: Sports, photographic musical instruments Describe	c, exercise, and	d other hobby equipment;	bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; car	pentry tools;
■ No		juns, ammunitio	on, and related equipmer	nt		
□ No		urs, leather coa	ats, designer wear, shoes	s, accessories		
	Nece	essary wearir	ng apparel]	\$50.00
□ No	ples: Everyday jewelry, o			dding rings, heirloom jewelry, watche	s, gems, gold, silver	405.00
	Cos	tume jewelry	<u> </u>			\$25.00
Exam _j ■ No □ Yes. 14. Any ot ■ No	arm animals ples: Dogs, cats, birds, h Describe ther personal and hous Give specific information	sehold items yo	ou did not already list, i	including any health aids you did	not list	
			from Part 3, including a	nny entries for pages you have atta	ached	\$2,175.00

Official Form 106A/B Schedule A/B: Property

page 2

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Case number (if known) Document Debtor 1 **Rose Marie Lopez**

	Describe Your Fin			
D	o you own or have an	y legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No	ou have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your p	etition
17	institution		ounts; certificates of deposit; shares in credit unions, brokera s with the same institution, list each.	ge houses, and other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking	Norstate's Bank	\$200.00
18		s, or publicly traded stocks ds, investment accounts with bro	okerage firms, money market accounts	
	☐ Yes	Institution or issuer	name:	
19	. Non-publicly traded joint venture	stock and interests in incorp	orated and unincorporated businesses, including an inte	erest in an LLC, partnership, and
		information about themName of entity:	 % of ownership:	
20	Negotiable instrumer	nts include personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	■ No □ Yes. Give specific i	nformation about them Issuer name:		
21	. Retirement or pensi Examples: Interests		403(b), thrift savings accounts, or other pension or profit-shar	ing plans
	Yes. List each acco	ount separately. Type of account:	Institution name:	
22		ised deposits you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications com	npanies, or others
	■ No □ Yes		Institution name or individual:	
23	. Annuities (A contrac	t for a periodic payment of mone	ey to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24	. Interests in an educa 26 U.S.C. §§ 530(b)(1	ation IRA, in an account in a q), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition	program.
	■ No □ Yes	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521	1(c):
25	. Trusts, equitable or ■ No	future interests in property (o	other than anything listed in line 1), and rights or powers	exercisable for your benefit

☐ Yes. Give specific information about them...

			Doc 1	Filed 02/21/18 Document	Entered 02/22 Page 13 of 48		Desc Main
De	ebtor 1	Rose Marie Lopez				ase number (if known)	
26.	Examp ■ No	s, copyrights, trademarks les: Internet domain name Give specific information a	s, websites, p			ts	
27.		es, franchises, and other les: Building permits, exclu			n holdings, liquor licens	es, professional licens	es
	■ No □ Yes.	Give specific information a	about them				
M	oney or p	property owed to you?					Current value of the portion you own?
							Do not deduct secured claims or exemptions.
28.	Tax refo	unds owed to you					
	Yes. 0	Give specific information a	bout them, in	cluding whether you alrea	ady filed the returns and	d the tax years	
]	****
			Anti	cipated 2017 Federa	I Tax Refund	Federal	\$613.00
						1	
			Anti	cipated 2017 State T	ax Refund	State	\$82.00
	Other a Examp No Yes.	Give specific information Imounts someone owes yoles: Unpaid wages, disabil benefits; unpaid loans Give specific information Its in insurance policies	you ity insurance you made to	someone else			
	<i>Examp</i> □ No	les: Health, disability, or lif	e insurance; l	health savings account (I	HSA); credit, homeown	er's, or renter's insurar	nce
	Yes.	Name the insurance compa Com	any of each p pany name:	olicy and list its value.	Beneficiar	y:	Surrender or refund value:
			m Life Insu ployment	rance offered throug	h Guadalu	pe Lopez	Unknown
32.	If you a someon	erest in property that is one of the beneficiary of a living the has died. Give specific information				urrently entitled to reco	eive property because
33.	Examp ■ No	against third parties, wh	nt disputes, in			or payment	
		Describe each claim					
34.	Other c	ontingent and unliquidat	ed claims of	every nature, including	g counterclaims of the	e debtor and rights to	set off claims

Debto	or 1	Case 18-04776	Doc 1	Filed 02/21/18 Document	Entered 02 Page 14 of	2/21/18 18:17:40 48 Case number (if known)	Desc Main
		Rose Marie Lopez				Case number (ii known)	
□,	Yes. I	Describe each claim					
35. A r	ny fina	ancial assets you did not	t already list				
	No						
	Yes.	Give specific information					
		he dollar value of all of your 4. Write that number he					\$895.00
	_					l	
Part 5:	Des	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real esta	te in Part 1.	
37. Do	you o	wn or have any legal or equi	itable interest	in any business-related p	roperty?		
■ N	lo. Go	to Part 6.					
ПΥ	es. Go	o to line 38.					
Part 6:		scribe Any Farm- and Commo ou own or have an interest in fa			n or Have an Interes	st In.	
46. D c	o you	own or have any legal or	r equitable in	terest in any farm- or o	commercial fishin	g-related property?	
	No. 0	Go to Part 7.					
	Yes.	Go to line 47.					
		_					
Part 7:	:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above		
		have other property of a					
	•	les: Season tickets, country	y club membe	ership			
		Give specific information					
ш	165. 0	Sive specific information					
54. A	Add th	he dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here		\$0.00
						l	
Part 8:	:	List the Totals of Each Part	of this Form				
55. F	Part 1:	: Total real estate, line 2					\$0.00
56. F	Part 2:	: Total vehicles, line 5			\$7,834.00		
57. F	Part 3:	: Total personal and hou	sehold items	s, line 15	\$2,175.00		
		: Total financial assets, li		_	\$895.00		
		: Total business-related			\$0.00		
		: Total farm- and fishing-			\$0.00		
61. F	Part 7:	: Total other property no	t listed, line !	54 +	\$0.00		
62. T	Total p	personal property. Add lir	nes 56 throug	h 61	\$10,904.00	Copy personal property to	stal \$10,904.00
63. T	Total o	of all property on Schedu	ule A/B. Add I	ine 55 + line 62			\$10,904.00

Official Form 106A/B Schedule A/B: Property page 5

		DUGUITE	III FAUE 13 UI 40	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Rose Marie Lope	Z		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this i amended filin

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the	Property	You	Claim	as	Exempt
---------	----------	-----	-----------------	-----	-------	----	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$7,834.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$50.00			735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
	\$7,834.00 \$1,500.00 \$100.00	\$1,500.00 \$500.00	\$7,834.00 \$7,834.00 \$1,500.00 \$1,00% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit

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Debtor 1 Rose Marie Lopez

Pebtor 1 Rose Marie Lopez

11000 Mario Eopoz				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Costume jewelry Line from Schedule A/B: 12.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Ellie Holli Golloddio 772. Tall			100% of fair market value, up to any applicable statutory limit	
Checking: Norstate's Bank Line from Schedule A/B: 17.1	\$200.00		\$300.00	735 ILCS 5/12-1001(b)
Line Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
Federal: Anticipated 2017 Federal Tax Refund	\$613.00		\$1,500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
State: Anticipated 2017 State Tax Refund	\$82.00		\$375.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
Term Life Insurance offered through employment	Unknown			215 ILCS 5/238
Beneficiary: Guadalupe Lopez Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adiustme	nt.)
■ No	. ,		2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2	• ,
☐ Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	?
□ No			•	
Π Yes				

		Document P	Page 17	7 of 48			
Fill in this information	on to identify you	r case:					
Debtor 1	Rose Marie Lop	67					
	rirst Name		ast Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name La	ast Name				
United States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF ILLING	DIS				
	. ,						
Case number							
(II KNOWN)					_	if this is an	
					amend	led filing	
Official Form 1	06D						
		What Have Claims Co		al levi Duene entr			
Schedule D:	Creditors	Who Have Claims Se	cure	d by Propert	y	12/15	
Be as complete and acc	curate as possible. I	f two married people are filing together,	ooth are ec	qually responsible for su	pplying correct informa	tion. If more space	
	ditional Page, fill it o	out, number the entries, and attach it to the	nis form. O	n the top of any addition	nal pages, write your na	me and case	
number (if known).	a alaima aaassad bs	· · · · · · · · · · · · · · · · · · ·					
1. Do any creditors have	_						
☐ No. Check this	s box and submit th	nis form to the court with your other sch	iedules. Y	ou have nothing else t	o report on this form.		
Yes. Fill in all	of the information b	pelow.					
Part 1: List All Se	cured Claims						
2. List all secured clair	ns. If a creditor has n	nore than one secured claim, list the credito	r separately	, Column A	Column B	Column C	
for each claim. If more t	han one creditor has	a particular claim, list the other creditors in Part 2.		Amount of claim	Value of collateral	Unsecured	
much as possible, list the claims in alphabeti		cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Best Buy Cre	edit Services	Describe the property that secures the	claim:	\$400.00	\$500.00	\$0.00	
Creditor's Name		Samsung 55' Smart HD TV					
		As of the date you file, the claim is: Che-	ck all that				
P.O. Box 790		apply.	on an inat				
Saint Louis, I		Contingent					
Number, Street, City,	, State & Zip Code	Unliquidated					
Who owes the debt?	Chook one	☐ Disputed Nature of lien. Check all that apply.					
_	Check one.	An agreement you made (such as mor		a.ura d			
Debtor 1 only		car loan)	gage or sec	curea			
Debtor 2 only	0 1						
☐ Debtor 1 and Debtor☐ At least one of the de	- ,	☐ Statutory lien (such as tax lien, mechand Judgment lien from a lawsuit	nc's lien)				
☐ Check if this claim		Other (including a right to offset)	ırchase l	Money Security			
community debt	relates to a	Other (including a right to offset)		money occurry			
Data daht was insures	January 8,	Look 4 dimits of account number	4815				
Date debt was incurred	d <u>2017</u>	Last 4 digits of account number					
Manda Canita	ol Comileon						
2.2 Mazda Capita	ai Services	Describe the property that secures the	claim:	\$9,730.92	\$7,834.00	\$1,896.92	
Creditor's Name		2014 Mazda Mazda3 54000 mile		, , , , , , , , , , , , , , , , , , , 		- , ,	
		2014 Mazaa Mazaas 54000 Milit	,3				
P.O. Box 780		As of the date you file, the claim is: Che apply.	ck all that				
Phoenix, AZ	85062	Contingent					
Number, Street, City,	, State & Zip Code	☐ Unliquidated					
		Disputed					
Who owes the debt?	Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		An agreement you made (such as mor	gage or sec	cured			
Debtor 2 only		car loan)					
Debtor 1 and Debtor	•	Statutory lien (such as tax lien, mechan	nic's lien)				
At least one of the de		Judgment lien from a lawsuit		Manay Ca			
☐ Check if this claim	relates to a	Other (including a right to offeet)	ırcnase l	wonev Security			

community debt

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Debtor 1	Rose Marie Lopez				Case number (if know)	
	First Name	Middle Name	Last Name		_	
Date debt	was incurred	March 2014	Last 4 digits of account number	2109		
Add the	dollar value of	f your entries in Columr	n A on this page. Write that number h	iere:	\$10,130.92	2
	the last page	•	ollar value totals from all pages.		\$10,130.92	2

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 10-04770 L	Document	Page 19	a 02/21/10 10.17.40	Desc Main
Fill in th	nis information to identify your		1 11110, 13	7 (A -1 0	
Debtor '	1 Rose Marie Lopez	-			
Depioi	First Name	Middle Name	Last Name		
Debtor 2	2				
(Spouse if	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
Case nu	ımber				
(if known)					☐ Check if this is an
					amended filing
	al Form 106E/F dule E/F: Creditors W	/ho Have Unsecured	Claims		12/15
	mplete and accurate as possible. Us				
eft. Attac	D: Creditors Who Have Claims Secth the Continuation Page to this page to case number (if known). List All of Your PRIORITY Un	e. If you have no information to re			
	ny creditors have priority unsecure				
_	No. Go to Part 2.				
— ··					
Part 2:	_	Y Unsecured Claims			
	iny creditors have nonpriority unsec				
_	lo. You have nothing to report in this p		vour other sche	dules	
— ·			, o a. o o		
unse	all of your nonpriority unsecured clacured claim, list the creditor separately one creditor holds a particular claim, li 2.	y for each claim. For each claim listed	I, identify what t	ype of claim it is. Do not list claims alre	eady included in Part 1. If more
					Total claim
4.1	Advocate Health Care	Last 4 digits of acc	ount number	8209	\$357.72
	Nonpriority Creditor's Name				·
	PO Box 6572	When was the debt	incurred?	November 8. 2017	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	11.7	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and and	other Type of NONPRIOR	RITY unsecured	I claim:	
	☐ Check if this claim is for a comm	munity			
	debt Is the claim subject to offset?	Obligations arisin report as priority clai		ration agreement or divorce that you d	lid not
	■ No			g plans, and other similar debts	
	□Yes	Other. Specify	Medical Del	bt	

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Debtor 1 Rose Marie Lopez Case number (if know) 4.2 Advocate Health Care Last 4 digits of account number 1478 \$200.00 Nonpriority Creditor's Name PO Box 6572 When was the debt incurred? December 27, 2017 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Debt Other. Specify 4.3 **Bayview Loan Servicing, LLC** Last 4 digits of account number 0000 \$194,091.00 Nonpriority Creditor's Name 4425 Ponce De Leon When was the debt incurred? 12-31-2015 5th Floor Coral Gables, FL 33146 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Mortgage Deficiency Judgment** Other. Specify 4.4 **Captal One** \$24.98 Last 4 digits of account number 4883 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? 2016 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases ☐ Yes

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Debtor 1 Rose Marie Lopez Case number (if know) 4.5 **Captal One** Last 4 digits of account number 3124 \$1,542.00 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? 2016 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit card purchases 4.6 **Discover** Last 4 digits of account number 3599 \$5,949.00 Nonpriority Creditor's Name P.O. Box 6103 When was the debt incurred? October 11, 2017 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Credit Card balance transfer** Π Yes Other. Specify **IICLCRNR** -Integrated Imaging 7601 \$106.70 4.7 Last 4 digits of account number **Cnslts** Nonpriority Creditor's Name P.O. Box When was the debt incurred? November 8, 2017 Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt ☐ Yes

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Case number (if know)

Debto	Rose Marie Lopez	Case number (if know)	
4.8	Lake County Surgeons, P.C. Nonpriority Creditor's Name 1 South Greenleaf	Last 4 digits of account number 1624 When was the debt incurred? October 20, 2017	\$116.79
	Suite A Gurnee, IL 60031 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.9	Midwest Anes Partners Nonpriority Creditor's Name P.O. Box 3613	Last 4 digits of account number 1217 When was the debt incurred? December 20, 2017	\$53.77
	Carol Stream, IL 60132	When was the debt incurred? December 20, 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical Debt	
4.1	Midwest Anesthesia	Last 4 digits of account number 1217	\$54.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ34.00
	255 West Michigan Avenue Jackson, MI 49201	When was the debt incurred? January 14, 2018	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Debt	
		— Outer, opening	

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Northshore University Healthsystem Nonpriority Creditor's Name	Last 4 digits of account number	4240	\$6
23056 Network Place Chicago, IL 60673	When was the debt incurred?	December 12, 2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical De	bt	
Pinnacle Management Services	Last 4 digits of account number	0018	\$
Nonpriority Creditor's Name	When was the debt incurred?		
830 Roundaboutptember 20, 2017 Suite B Dundee, IL 60118	when was the debt incurred?	September 20, 2017	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical De	bt	
Pinnacle Management Services	Last 4 digits of account number	3574	\$
Nonpriority Creditor's Name	-		
830 Roundaboutptember 20, 2017 Suite B	When was the debt incurred?	August 26, 2017	
Dundee, IL 60118 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• •	•••	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
is the Gain subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	a plane, and other cimilar debte	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

		Document	Page 24 01 48
Debtor 1	Rose Marie Lopez		Case number (if know)

have more than one creditor for any of the debts th notified for any debts in Parts 1 or 2, do not fill out		dditional creditors here. If you do not have additional persons to be
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Dr. P. Strohmayer	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1 S. Greenleaf Street		■ Part 2: Creditors with Nonpriority Unsecured Claims
Suite A Gurnee, IL 60031		
Curries, in 00001	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
FCI Lender Services, Inc.	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 27370 Anaheim, CA 92809		■ Part 2: Creditors with Nonpriority Unsecured Claims
Analielli, OA 32003	Last 4 digits of account number	6296
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Lake County Circuit Court	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
18 N. County St. Waukegan, IL 60085		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	2167
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Randall S. Miller & Associates, LLC	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
120 North LaSalle Street Suite 1140		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago, IL 60602	Last 4 digits of account number	2167
	Last 4 digits of account number	2107
Name and Address	On which entry in Part 1 or Part 2 did	
Realty Sales Plus, LLC	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
PO Box 367 Antioch, IL 60002		Part 2: Creditors with Nonpriority Unsecured Claims
Antioon, it ooos	Last 4 digits of account number	2167

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 203,390.90
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 203,390.90

			III FAUE 23 UI 40
Fill in this infor	mation to identify your	case:	
Debtor 1	Rose Marie Lope	Z	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

		Docum	ent Page 26 of	f 48
Fill in this	information to identify your o	ase:		
Debtor 1	Rose Marie Lopez			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
		NORTHERN DISTRIC	T OF ILL INOIS	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS	
Case num	ber			— 0
(II KIIOWII)				☐ Check if this is an amended filing
Officia	l Form 106H			
Sched	lule H: Your Code	ebtors		12/15
	and case number (if known). you have any codebtors? (If y			as a codebtor.
■ No □ Yes	6			
	hin the last 8 years, have you na, California, Idaho, Louisiana,			? (Community property states and territories include noton, and Wisconsin.)
_	,,	,		g.c., 2
`	Go to line 3.			
⊔ Yes	s. Did your spouse, former spou	se, or legal equivalent li	ve with you at the time?	
in line Form	e 2 again as a codebtor only if	that person is a guara	ntor or cosigner. Make s	of your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Officia G). Use Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor) Code		Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and ZIF	Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street	Chata	ZIP Code	-
	City	State	ZIP Code	
3.2				Cahadula D. lina
	Name			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			-
	City	State	ZIP Code	

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Sill	in this information to	a idantify your or	200				•				
	btor 1	Rose Marie									
	btor 2 buse, if filing)		•			_					
Uni	ited States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If ki	se number						□ A		ed filing ent showing	g postpetition	
	fficial Form						M	IM / DD/ Y	YYY		
	chedule I:		ome sible. If two married peo								12/1
spo atta	rt 1: Describe	earated and you et to this form. (e Employment	are married and not filing wing the spouse is not filing wing wing the top of any additions.	ith you, do not inclu onal pages, write yo	ıde infor	mati	on about	your spour spour spour (if	ouse. If mo known). A	ore space is nswer every	needed,
	information.			Debtor 1						ling spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed□ Not employed				☐ Employed ☐ Not employed			
	employers.		Occupation Administrative Assistant								
	Include part-time, self-employed wo		Employer's name	Oracle							
	Occupation may in or homemaker, if		Employer's address	1405 Lake Cool Deerfield, IL 60							
			How long employed to	here? May 15	5, 2017			_			
Pai	rt 2: Give Det	tails About Mor	thly Income								
	imate monthly inco		ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	on for all e	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Dek	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	4	,100.08	\$	N/A	
3.	Estimate and list	t monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	4,10	80.00	\$	N/A	

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Deb	tor 1	Rose Marie Lopez	_	С	ase number (if ki	nown)				
					For Debtor 1			Debtor :		1
	Cop	y line 4 here	4.	-	\$ 4,100	0.08	\$	i-iiiiig 3	N/A	_
5.	Liet	all payroll deductions:								-
٥.			50		\$ 98:		¢		NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b			3.88 0.00	\$_ \$		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	5c		· ——	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		:	0.00	\$_		N/A	_
	5e.	Insurance	5e		·	6.69	\$_		N/A	_
	5f.	Domestic support obligations	5f.	. :	. —	0.00	\$		N/A	_
	5g.	Union dues	5g	j. :	\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify: Life Insurance	5h	.+ 3	\$ 9	9.44	+ \$		N/A	_
		Long-term Disability		:	\$ 13	3.92	\$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	1,343	3.93	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	2,756	5.15	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00	\$		N/A	_
	8b.	Interest and dividends	8b	. :	\$	0.00	\$		N/A	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c 8d		-	0.00 0.00	\$_ \$		N/A N/A	_
	8e.	Social Security	8e		·	0.00	\$ -		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	-
	8g.	Pension or retirement income	8g			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+ 3	\$	0.00	+ \$_		N/A	-
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,756.15	1 ¢		NI/A	= \$	2 756 15
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		т —	2,730.13			N/A	-	2,756.15
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies						12.	\$	2,756.15
									Combi	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?						inontni	y income
	_	Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

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- :::::	in this informa	tion to identify yo	our caca:			1				
		don to lacitary ye	our case.							
Deb	tor 1	Rose Marie I	_opez			_	neck if this is:	ad filina		
Deb	tor 2							•	wing postpetition chapte	•r
(Spc	ouse, if filing)								the following date:	•
Unite	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLI	NOIS		MM / DD /	YYYY		
Case	e number									
(If kr	nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ses					12	2/15
Be a	as complete a	and accurate as	possible. eded, atta	If two married people a ch another sheet to this						
Pari	t 1: Descr Is this a join	ibe Your House	hold							
1.	-									
	■ No. Go to) line 2. e s Debtor 2 live i	in a conar	ata hausahald?						
			iii a sepai	ate nousenoid?						
			st filo Offici	al Form 106J-2, <i>Expense</i>	os for Soporato House	ahald of D	obtor 2			
	Б 1,	es. Debioi 2 mas	ot lile Offici	ai i 01111 1005-2, <i>Expense</i>	es for Separate Flouse	SHOIG OF D	ebioi 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Depend age	lent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									□ Yes □ No	
									□ Yes	
3.	Do your exp	enses include		No					— 103	
		f people other t d your depende	han $_{oldsymbol{\square}}$	Yes						
Part	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses						
exp	imate your ex	cpenses as of yo	our bankrı	uptcy filing date unless y is filed. If this is a sup						
the	value of sucl	h assistance an		government assistance luded it on <i>Schedule I:</i>			v	our exp	0000	
(Ott	ficial Form 10	J61.)						oui exp	C113C3	
4.		or home owners		ses for your residence. r lot.	Include first mortgag	e 4.	\$		1,200.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's				4b.	\$		35.00	
			•	pkeep expenses		4c.			25.00	
5.		owner's associat		dominium dues our residence, such as h	ome equity loops	4d.	\$ \$		0.00 0.00	
J.	Auditionali	igage payille	onito for yo	on residence, such as h	ome equity loans	٥.	Ψ		0.00	

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Debtor 1 Rose N	Marie Lopez	Case num	ber (if known)	
. Utilities:				
	ty, heat, natural gas	6a.	\$	120.00
	sewer, garbage collection	6b.	\$	0.00
	one, cell phone, Internet, satellite, and cable services	6c.	·	85.00
6d. Other. S		6d.	·	0.00
	usekeeping supplies	7.	·	450.00
	d children's education costs	8.	\$	
		o. 9.	\$	0.00
-	ndry, and dry cleaning		•	50.00
	e products and services	10.	\$	75.00
	dental expenses	11.	\$	50.00
	on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	200.00
	t, clubs, recreation, newspapers, magazines, and books	13.	·	25.00
	ntributions and religious donations	14.	·	0.00
	initibutions and religious dollations	14.	Φ	0.00
 Insurance. 	insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insu		15a.	\$	0.00
15b. Health i		15a. 15b.	·	0.00
15c. Vehicle		15b.	·	125.00
			*	
	surance. Specify:	15d.	Φ	0.00
	include taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
Specify:			\$	0.00
	r lease payments: ments for Vehicle 1	17a.	¢	312.96
		17a. 17b.	·	
	ments for Vehicle 2		·	0.00
17c. Other. S		17c.	*	0.00
17d. Other. S		17d.	\$	0.00
	ts of alimony, maintenance, and support that you did not report		\$	0.00
	m your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106 nts you make to support others who do not live with you.	oi). 10.	\$	0.00
Specify:	into you make to support others who do not live with you.	19.	Ψ	0.00
	operty expenses not included in lines 4 or 5 of this form or on S		ur Incomo	
	ges on other property	20a.		0.00
20b. Real es		20a. 20b.	· -	0.00
		20b. 20c.	·	
	y, homeowner's, or renter's insurance			0.00
	ance, repair, and upkeep expenses	20d.		0.00
	wner's association or condominium dues	20e.	·	0.00
. Other: Specify	<i>y</i> :	21.	+\$	0.00
. Calculate voi	ır monthly expenses			
22a. Add lines			\$	2,752.96
	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	2,132.30
		_	·	0.750.00
22c. Add line 2	22a and 22b. The result is your monthly expenses.		\$	2,752.96
. Calculate vou	ır monthly net income.			
	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	2,756.15
	our monthly expenses from line 22c above.	23b.	·	2,752.96
_02. OOP, yo		200.	·	2,102.30
23c. Subtrac	t your monthly expenses from your monthly income.			
	ult is your monthly net income.	23c.	\$	3.19
	•			
	ct an increase or decrease in your expenses within the year after			
	you expect to finish paying for your car loan within the year or do you expect	your mortgage p	payment to increase	e or decrease because o
	he terms of your mortgage?			
No.				
☐ Yes.	Explain here:			

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Fill in this	s information to identify your	case:			
Debtor 1					
Deploi	Rose Marie Lope	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
			Daletania Oa	la a desta a	
Decia	aration About a	ın individual	Deptor's Sc	nedules	12/15
years, or b	money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1 Sign Below	519, and 3571.			
Did y	you pay or agree to pay some	eone who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
	No				
	Yes. Name of person			Attach Rankru	ptcy Petition Preparer's Notice,
ш					nd Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the sum	nmary and schedules filed	d with this declaration	and
X Is	s/ Rose Marie Lopez		X		
_	Rose Marie Lopez		Signature of	Debtor 2	
	Signature of Debtor 1		2.3		
D	Date February 21, 2018		Date		
					

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Fill	n this inform	ation to identify you	case:			
Deb	tor 1	Rose Marie Lope	Middle Name	Last Name		
Deb	tor 2	i iist ivaille	Middle Name	Last Name		
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
Case	e number					
(if kno	own)				_	heck if this is an
					a	mended filing
Oπ,	isial Fam	107				
	icial For		Affaira far Individ	luala Filina far D	a.a.l	
			Affairs for Individ			4/1
					equally responsible for sup additional pages, write you	
numl	ber (if known). Answer every ques	stion.			
Part	1: Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married					
	■ Not marr	ied				
2.	During the la	et 3 years have you	lived anywhere other than v	where you live now?		
۷.		st 5 years, nave you	iived allywhere other than v	where you live now :		
	□ No ■ V · · ·					
	Yes. List	all of the places you l	ved in the last 3 years. Do no	it include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1343 Chest	nut Street	From-To:	☐ Same as Debtor 1		☐ Same as Debtor 1
	Waukegan	IL 60085	August 2008-			From-To:
			April 2016			
					ity property state or territory co, Texas, Washington and W	
	■ No					
		ce sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Off	ficial Form 106H).		
Part	2 Explain	the Sources of You	r Income			
	Fill in the total	amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	Il businesses, including part-		ndar years?
	□ No					
	_	in the details.				
		in the detaile.	D 14		D.1.	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,942.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Document Page 33 of 48 Case number (if known) Debtor 1 Rose Marie Lopez Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$46,900.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$41,242.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** each source (before deductions Describe below. Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Mazda Capital Services C/O Chase P.O. Box 78069 Phoenix, AZ 85062	\$312.96 per month	\$938.88	\$9,730.92	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.										
	No No										
	Yes. List all payments to an insider.				_						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited are insider? Include payments on debts guaranteed or cosigned by an insider.										
	No										
	Yes. List all payments to an insider				_						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name					
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.										
	Case title	Nature of the case	Court or agency		Status of the case						
	Case number	Nature of the case	Court or agency		Status of the case						
	Bayview Loan Servicing, LLC v. Rose Marie Lopez 15 CH 2167	Foreclosure	Lake County Circuit Court 18 N. County St. Waukegan, IL 60085		□ Pending□ On appeal■ Concluded						
						judgment ter a Sheriff's					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	w.	erty repossessed, for		shed, attached						
	Creditor Name and Address	Describe the Property	Describe the Property Date		Value of the property						
		Explain what happened									
	Bayview Loan Servicing, LLC 4425 Ponce De Leon	1343 Chestnut Street, Waukegan, IL 60085 Nov 201		ember 21,	Unknown						
	5th Floor	☐ Property was repossessed.									
	Coral Gables, FL 33146	■ Property was foreclos									
		☐ Property was garnished.									
		☐ Property was attached, seized or levied.									
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.										
	Creditor Name and Address				Date action was						
				taker	1						

Case 18-04776 Filed 02/21/18 Entered 02/21/18 18:17:40 Document Page 35 of 48 Case number (if known) Debtor 1 **Rose Marie Lopez** 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment Email or website address made Person Who Made the Payment, if Not You Albarran Law Offices **Attorney Fees** November 20, \$1,835.00 204 N. West Street 2017 Waukegan, IL 60085 albarranlaw@yahoo.com **Debtor** CC Advising, Inc. \$9.76 January 15, \$9.76 2018 703 Washington Ave. Suite 200 Bay City, MI 48708 ccadvising.com

Doc 1

Debtor

Desc Main

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Debtor 1 **Rose Marie Lopez**

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	Yes. Fill in the details.								
	Person Who Was Paid Address	Description and v transferred	alue of any property	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and very property transfer	red p	escribe any property or ayments received or debts aid in exchange	Date transfer was made				
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and v	Description and value of the property transferred						
Par	8: List of Certain Financial Accounts, In	netrumente. Safe Denosi	Boyes and Storage	Unite					
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		ribe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?				

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Debtor 1 **Rose Marie Lopez**

Par	19: Identify Property You Hold or Control for	Someone Else				
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in for someone.						
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	110: Give Details About Environmental Inform	ation				
For	he purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·			
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	l sites.				
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxio	substance,		
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environ	nental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Cor	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	□ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					

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Diq.	Yes you pay or agree to pay someone who is no	t an attorney to help you fill out hankrunt	cy forms?			
Did ■ N	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?			
Da	February 21, 2018	Date				
	ose Marie Lopez gnature of Debtor 1	Signature of Debtor 2				
are with 18 U		false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.			
	rt 12: Sign Below					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
	■ No □ Yes. Fill in the details below.					
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement to a	anyone about your business? Include all financial			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
		Yes. Check all that apply above and fill in the details below for each business.				

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Fill in this infor	mation to identify your	case:		
Debtor 1	Rose Marie Lope	<u> </u>		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	riduals Filing Under Chap	ter 7
			Tada Timig Times Time	
If you are an ind	dividual filing under cha	pter 7, you must fil	l out this form if:	
creditors have	ve claims secured by yo	ur property, or		
	sed personal property a			
			you file your bankruptcy petition or by the date e time for cause. You must also send copies to	
on the				
		r in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
sign a	nd date the form.			
	and accurate as possib your name and case nur		s needed, attach a separate sheet to this form. C	on the top of any additional pages,
write	your name and case nur	ibei (ii kilowii).		
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credi		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
	reditor and the property t	hat is collateral	What do you intend to do with the property th secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Best Buy Credit Servi	ces	☐ Surrender the property.	□No
name:	-		☐ Retain the property and redeem it.	_
Description of	f Samsung 55' Sma	rt UD TV	Retain the property and enter into a	Yes
property	Samsung 33 Sinai	THEIV	Reaffirmation Agreement.	
securing debt	t:		☐ Retain the property and [explain]:	
One President		0/0.01	_	_
Creditor's name:	Mazda Capital Service	es C/O Chase	Surrender the property.	□ No
namo.			Retain the property and redeem it.Retain the property and enter into a	■ Yes
Description of	f 2014 Mazda Mazda	3 54000 miles	Reaffirmation Agreement.	. 33

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

property

securing debt:

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Debto	or 1	Rose Marie Lopez	Case number (if known)
Desc	•	ame: n of leased	□ No
Prope	erty:		☐ Yes
	or's na ription	ame: n of leased	□ No
Prope	erty:		☐ Yes
	or's na	ame: n of leased	□ No
Prope			☐ Yes
	or's na	ame: n of leased	□ No
Prope		101100000	☐ Yes
	or's na	ame: n of leased	□ No
Prope		i Oi leaseu	☐ Yes
	or's na		□ No
Prope		n of leased	☐ Yes
	or's na	ame: of leased	□ No
Prope		i oi ieaseu	☐ Yes
Part 3	3: 8	Sign Below	
Under prope	r pena erty th	alty of perjury, I declare that I have indicated at is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
		ose Marie Lopez	x
		Marie Lopez ture of Debtor 1	Signature of Debtor 2
1	Date	February 21, 2018	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-04776 Doc 1 Filed 02/21/18 Entered 02/21/18 18:17:40 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Rose Marie Lopez		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	EBTOR(S)
c	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	I to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,500.00
	Prior to the filing of this statement I have received			1,500.00
	Balance Due			0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	■ I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are men	nbers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name			
6. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
b c	 Analysis of the debtor's financial situation, and renders Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ment of affairs and plan which is and confirmation hearing, a duce to market value; ex is as needed; preparation	h may be required; nd any adjourned hea	arings thereof;
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the followin chargeability actions, jud	g service: icial lien avoidand	es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	r payment to me for	representation of the debtor(s) in
Fe	ebruary 21, 2018	/s/ Brittany Helfe	er	
Do	nte	Brittany Helfer 6		
		Signature of Attorn Albarran Law Of		
		204 N. West Stre	et	
		Waukegan, IL 60		
		874-782-1111 Fa albarranlaw@ya		
		Name of law firm		

United States Bankruptcy CourtNorthern District of Illinois

In re	Rose Marie Lopez		Case No.	
III IC	Nose mane Lopez	Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	20
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credite	ors is true and correct to	the best of my
Date:	February 21, 2018	/s/ Rose Marie Lopez Rose Marie Lopez Signature of Debtor		

Advocate Health Care PO Box 6572 Carol Stream, IL 60197

Advocate Health Care PO Box 6572 Carol Stream, IL 60197

Bayview Loan Servicing, LLC 4425 Ponce De Leon 5th Floor Coral Gables, FL 33146

Best Buy Credit Services P.O. Box 790441 Saint Louis, MO 63179

Captal One P.O. Box 6492 Carol Stream, IL 60197

Captal One P.O. Box 6492 Carol Stream, IL 60197

Discover P.O. Box 6103 Carol Stream, IL 60197

Dr. P. Strohmayer 1 S. Greenleaf Street Suite A Gurnee, IL 60031

FCI Lender Services, Inc. PO Box 27370 Anaheim, CA 92809

IICLCRNR -Integrated Imaging Cnslts
P.O. Box
Chicago, IL 60694

Lake County Circuit Court 18 N. County St. Waukegan, IL 60085

Lake County Surgeons, P.C. 1 South Greenleaf Suite A Gurnee, IL 60031

Mazda Capital Services C/O Chase P.O. Box 78069 Phoenix, AZ 85062

Midwest Anes Partners P.O. Box 3613 Carol Stream, IL 60132

Midwest Anesthesia 255 West Michigan Avenue Jackson, MI 49201

Northshore University Healthsystem 23056 Network Place Chicago, IL 60673

Pinnacle Management Services 830 Roundaboutptember 20, 2017 Suite B Dundee, IL 60118

Pinnacle Management Services 830 Roundaboutptember 20, 2017 Suite B Dundee, IL 60118

Randall S. Miller & Associates, LLC 120 North LaSalle Street Suite 1140 Chicago, IL 60602

Realty Sales Plus, LLC PO Box 367 Antioch, IL 60002